Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 1 of 71

| Fill in this information to identify your case: | | |
|---|--|-----------------------------------|
| United States Bankruptcy Court for the: Northern District of: Illinois (State) | | |
| Case number (if known) | Chapter you are filing under: Chapter 7 | |
| | Chapter 11 Chapter 12 Chapter 13 | Check if this is a amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Cheryl First name | First name |
| Write the name that is on your government-issued picture identification (for example, your driver's license or passport | L Middle name Fox | Middle name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| All other names you have used in the last 8 years | First name | First name |
| Include your married or maiden names. | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social Security number or | XXX - XX- 5186 OR | XXX - XX- OR |
| federal Índividual Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 2 of 71

| D | ebtor 1 Cheryl First Name | L Fox Middle Name Last Name | Case number (if known) |
|----|--|---|--|
| | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 1522 S Harding Ave Number Street | Number Street |
| | | Chicago Illinois 60623 | |
| | | City State Zip Code Cook | City State Zip Code |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 3 of 71

| De | ebtor 1 Cheryl | L | | Case number (if kno | wn) |
|-----|---|--|---|---|--|
| | First Name | Middle Name | Last Name | | |
| Pa | rt 2: Tell the Court Abo | out Your Bankruptcy Case | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | iption of each, see <i>Notice Requ</i> lso, go to the top of page 1 and | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. | How you will pay the fee | more details about how cashier's check, or mone may pay with a credit ca I need to pay the fee in Individuals to Pay Your I request that my fee be judge may, but is not rect the official poverty line to | you may pay. Typically, if you ey order. If your attorney is surd or check with a pre-printer installments. If you choose Filing Fee in Installments (One waived (You may request quired to, waive your fee, and that applies to your family singuou must fill out the Application. | ou are paying the submitting your ed address. this option, sig official Form 103 this option only d may do so onl ze and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of inable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. | Have you filed for bankruptcy within the last 8 years? | V No. Yes. District District District | When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | <u>W</u> hen | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. | Do you rent your residence? | ✓ No. Go to line 1 | | | ot You (Form 101A) and file it with |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 4 of 71

| ity Broker (as defined in 11 U.S.C. § 101(6)) he above | | |
|---|--|--|
| | | |
| ebtor so that it can set n your most recent balance of these documents do not | | |
| | | |
| to the definition in the | | |
| e definition in the Bankruptcy | | |
| tion | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Zip Code | | |
| Zip Cod | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 5 of 71

Debtor 1 Cheryl L First Name Middle Name Last Name Case number (if known)

| Pa | rt 5: Explain Your Effo | rts to Receive a Brie | efing About Credit Counseling | | | |
|--------------------|--|--|--|-----|---|---|
| | | About Debtor 1: | | Abo | out Debtor 2 (Sp | oouse Only in a Joint Case): |
| 15. Tell the court | | You must check one: | | You | ı must check one: | |
| | whether you have received briefing about credit counseling. | counseling agen | ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion. | | counseling ager | fing from an approved credit ncy within the 180 days before I aptcy petition, and I received a mpletion. |
| | The law requires that you receive a briefing | | he certificate and the payment plan, veloped with the agency. | | | the certificate and the payment plan, eveloped with the agency. |
| | about credit counseling before you file for bankruptcy. You must truthfully | counseling agen | ring from an approved credit ncy within the 180 days before I optcy petition, but I do not have a npletion. | | counseling ager | fing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have a mpletion. |
| | check one of the following choices. If you cannot do so, you are not eligible to file. | | er you file this bankruptcy petition, opy of the certificate and payment | | | er you file this bankruptcy petition, copy of the certificate and payment |
| | If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. | from an approve obtain those ser made my reques | ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the | | from an approve obtain those ser made my reques | ked for credit counseling services ed agency, but was unable to rvices during the 7 days after I st, and exigent circumstances emporary waiver of the |
| | | begin To ask for a 30-civities requirement, atta efforts you made unable to obtain | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this | | requirement, attace efforts you made unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this |
| | | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. | | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. |
| | | receive a briefing must file a certifica with a copy of the | offied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | | receive a briefing must file a certification with a copy of the | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along a payment plan you developed, if any. o, your case may be dismissed. |
| | | | he 30-day deadline is granted only mited to a maximum of 15 days. | | • | the 30-day deadline is granted only mited to a maximum of 15 days. |
| | | | I am not required to receive a briefing about credit counseling because of: | | I am not require counseling beca | d to receive a briefing about credit ause of: |
| | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | | | I am currently on active military duty in a military combat zone. | | | I am currently on active military duty in a military combat zone. |
| | | about credit coun | are not required to receive a briefing seling, you must file a motion for ounseling with the court. | | about credit cour | are not required to receive a briefing seling, you must file a motion for ounseling with the court. |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 6 of 71

| Debtor 1 Cheryl | L Middle News | Fox | Case number (if known) | |
|---|--|---------------------------------------|--|---|
| First Name | Middle Name | Last Name | | |
| Part 6: Answer These Que | | primarily consumer de | | efined in 11 U.S.C. § 101(8) as |
| you have? | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | personal, family, or househo | old purpose." |
| | ☐ No. Go to li ✓ Yes. Go to | | | |
| | | | ts? Rusiness debts are debts | s that you incurred to obtain |
| | | | hrough the operation of the | |
| | ☐ No. Go to li | ne 16c. | | |
| | Yes. Go to | | | |
| | 16c. State the type of | of debts you owe that are | not consumer debts or busi | ness debts. |
| 17. Are you filing under Chapter 7? | No. I am not filing | under Chapter 7. Go to line | e 18. | |
| Do you estimate that after any exempt | | | nate that after any exempt prop ilable to distribute to unsecured | erty is excluded and administrative d creditors? |
| property is excluded | □ No. | • | | |
| and administrative expenses are paid that | = | | | |
| funds will be available | ☐ Yes. | | | |
| for distribution to | | | | |
| unsecured creditors? | - | | | |
| 18. How many creditors | ✓ 1-49 ☐ 50-99 | | 00-5,000 01-10,000 | 25,001-50,000 50,001-100,000 |
| do you estimate that you owe? | 100-199 | | 01-25,000 | More than 100,000 |
| you onto | 200-999 | | | |
| 19. How much do you | \$0-\$50,000 | \$1,0 | 000,001-\$10 million | \$500,000,001-\$1 billion |
| estimate your assets | \$50,001-\$100,00 | | ,000,001-\$50 million | \$1,000,000,001-\$10 billion |
| to be worth? | \$100,001-\$500,0 | | ,000,001-\$100 million | \$10,000,000,001-\$50 billion |
| | \$500,001-\$1 mil | | 0,000,001-\$500 million | More than \$50 billion |
| ²⁰ . How much do you | \$0-\$50,000 | | 000,001-\$10 million | \$500,000,001-\$1 billion |
| estimate your liabilities to be? | \$50,001-\$100,00 | | ,000,001-\$50 million ,000,001-\$100 million | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion |
| nabilities to be: | \$500,001-\$300,001 | | 0,000,001-\$500 million | More than \$50 billion |
| Part 7: Sign Below | | | , | |
| For you | I have examined this | petition, and I declare un | der penalty of perjury that th | e information provided is true and |
| | correct. | | | |
| | | | | ligible, under Chapter 7, 11,12, or 13 n chapter, and I choose to proceed |
| | under Chapter 7. | | | . oap.a., aa oooo .o p.oooa |
| | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | |
| | I request relief in acco | ordance with the chapter | of title 11, United States Co | de, specified in this petition. |
| | | | | money or property by fraud in |
| | connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | |
| | /s/ Cheryl Fox | | * | |
| | Signature of Debto | r 1 | Signature of D | ebtor 2 |
| | Executed on | 4/13/2018 | Executed or | 1 |
| | _ | MM / DD / YYYY | | MM / DD / YYYY |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 7 of 71

| Debtor 1 Cheryl | L | Fox | Case number (if k | nown) | | | |
|--|---------------------------|--|-----------------------------|--|--|--|--|
| First Name | Middle Name | Last Name | | | | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12 | , or 13 of title 11, United | ave informed the debtor(s) about I States Code, and have explained the so certify that I have delivered to the | | | |
| If you are not | | debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I | | | | | |
| represented by an | | have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | | |
| attorney, you do not | • | i air iriqairy triat trio ii | | and med with the polition to most cot. | | | |
| need to file this page. | /s/ Elise Harmening | | Date | 4/13/2018 | | | |
| | Signature of Attorney | | | M / DD / YYYY | | | |
| | g | | | | | | |
| | | | | | | | |
| | Elise Harmening | | | | | | |
| | Printed name | | | | | | |
| | Semrad Law Firm | | | | | | |
| | Firm name | | | | | | |
| | 20 S. Clark Street | | | | | | |
| | Street | | | | | | |
| | 28th Floor | | | | | | |
| | | | | | | | |
| | Chicago | | Illinois | 60603 | | | |
| | City | | State | Zip Code | | | |
| | | | | | | | |
| | Contact phone | 3124852095 | Email address | eharmening@semradlaw.com | | | |
| | | | _ | | | | |
| | 6325657 | | Illinois | | | | |
| | Bar number | | State | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 8 of 71

| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Cheryl | L | Fox |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|--------------------------------------|
| . Schedule A/B: Property (Official Form 106A/B) | ФО ОО |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$1,460.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$1,460.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$0.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$28,523.00 |
| Your total liabilities | \$28,523.00 |
| | |
| Part 3: Summarize Your Income and Expenses | |
| | |
| | \$2,162.51 |
| . Schedule I: Your Income (Official Form 106I) | \$2,162.51 \$2,012.51 |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 9 of 71

| Deb | tor 1 Cheryl | L | Fox | Case number (if known) | | | |
|--|----------------------------|---|--|---|------------|--|--|
| | First Name | Middle Name | Last Name | | | | |
| Part | 4: Answer These Qu | uestions for Administra | tive and Statistical Recor | rds | | | |
| 6. A | re you filing for bankrup | tcy under Chapters 7, 11, o | r 13? | | | | |
| Г | No. You have nothing | to report on this part of the fo | orm. Check this box and subm | it this form to the court with your other sch | redules. | | |
| L | - | | | | | | |
| Ŀ | Yes. | | | | | | |
| 7. W | /hat kind of debt do you | have? | | | | | |
| Į. | | | | by an individual primarily for a personal, | | | |
| _ | family, or household p | urpose. 11 U.S.C. § 101(8). I | Fill out lines 8-10 for statistical | purposes. 28 U.S.C. § 159. | | | |
| | | rimarily consumer debts. You with your other schedules. | ou have nothing to report on th | nis part of the form. Check this box and su | pmit | | |
| | | | | | | | |
| | | our Current Monthly Incom , Form 122B Line 11; OR , Fo | ne: Copy your total current mor orm 122C-1 Line 14. | nthly income from Official | \$1,380.00 | | |
| 9. | Copy the following spec | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | | | | | |
| | From Part 4 on Schedu | le E/F, copy the following: | Total claim | | | | |
| | | | | ** - * | | | |
| | 9a. Domestic support ob | ligations (Copy line 6a.) | | \$0.00 | | | |
| | 9b. Taxes and certain oth | ertain other debts you owe the government. (Copy | ment. (Copy line 6b.) | \$0.00 | | | |
| | 9c. Claims for death or pe | ersonal injury while you were | intoxicated. (Copy line 6c.) | \$0.00 | | | |
| | 9d. Student loans. (Copy | line 6f) | | \$0.00 | | | |
| | , 13 | 9e. Obligations arising out of a separation agreement or divor priority claims. (Copy line 6g.) | | \$0.00 | | | |
| | | | or alvorce that you did not repo | ort as | | | |
| | | | | \$0.00 | | | |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | | | | | | | |

\$0.00

9g. Total. Add lines 9a through 9f.

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 10 of 71

| Fill in this | information t | o identify your c | ase: | | | | | |
|---------------------------------------|--|---|--|-------------------------|--|--|--|--|
| Debtor 1 | Cheryl | | L | | Fox | | | |
| | First N | ame | Middle N | lame | Last Name | | | |
| Debtor 2 (Spouse, if fi | iling) First Na | ame | Middle N | lame | Last Name | | | |
| United Sta | ates Bankrupto | cy Court for the: | Northern | | District of Illinois | | | |
| Case num | nber | | | | (State) | | | |
| (If known) | | | | | | | | Check if this is an |
| Officia | al Form | 106A/B | | | | | | amended filing |
| Sche | dule A/ | B: Prope | rty | | | | | 12/1 |
| category v responsib write your | where you thing the for supplying and care and c | ink it fits best. E ng correct infor ase number (if k | Be as complete a mation. If more s nown). Answer e | nd ac pace very c | asset only once. If an ass curate as possible. If two is needed, attach a sepa uestion. • Other Real Estate Yo | married people a rate sheet to this | re filing together, both a form. On the top of any a | re equally |
| 1. Do you | u own or have | e any legal or ec | uitable interest | in any | residence, building, land | l, or similar prope | rty? | |
| ✓ | No. Go to Pa | art 2 | | | | | | |
| | Yes. Where is | s the property? | | | | | | |
| 1.1 | | | | | t is the property? Check | all that apply. | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.1 | Street addres | s, if available, or | other description | | Single-family home Duplex or multi-unit buildin | a | Creditors Who Have Cla | ims Secured by Property. |
| | | | | | Condominium or cooperati | = | Current value of the | Current value of the |
| | | | | Ħ | Manufactured or mobile ho | me | entire property? | portion you own? |
| | Number | Street | | | _and | | Describe the meture of | f.va.vv avvvaavahin |
| | Number | Olicci | | | nvestment property | | Describe the nature of interest (such as fee s | simple, tenancy by |
| | City | State | Zip Code | | Гimeshare Other | | the entireties, or a life | e estate), if known. |
| | | | | one. | has an interest in the properties of the propert | | Check if this is co (see instructions) | mmunity property |
| | | | | | At least one of the debtors | | | |
| | | | | | er information you wish to erty identification numb | | em, such as local | |
| If you | own or have | more than one, li | st here: | | • | | | |
| 4.0 | | | | | t is the property? Check | all that apply. | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.2 | Street addres | s, if available, or | other description | | Single-family home Duplex or multi-unit buildin | a | | ims Secured by Property. |
| | | | | | Condominium or cooperati | • | Current value of the | Current value of the |
| | | | _ | | Manufactured or mobile ho | | entire property? | portion you own? |
| | | | | Ħ | _and | | | |
| | Number | Street | | | nvestment property | | Describe the nature of interest (such as fee s | |
| | City | State | Zip Code | | Timeshare Other | | the entireties, or a life | |
| | | | | one. | Debtor 1 only | operty? Check | Check if this is co (see instructions) | mmunity property |
| | | | | | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only At least one of the debtors | | | |
| | | | | | ar information you wish t | | om such as local | |

property identification number:

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 11 of 71

| Debtor 1 | Cheryl | L | Fox | Case numbe | r (if known) | |
|-----------|---|---------------------|---|------------------|--|---|
| | First Name | Middle Name | Last Name | | | |
| | et address, if available, or o | ther description | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property | apply. | the amount of any secu | - |
| City | State | Zip Code | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | other | Check if this is co (see instructions) | |
| | | | Other information you wish to add property identification number: | about this item, | such as local | |
| Part 2: | Describe Your Vehicler, lease, or have legal or | es | here | registered or no | ot? Include any vehicles | |
| ou own tl | hat someone else drives. If ins, trucks, tractors, sport u | you lease a vehicle | , also report it on Schedule G: Executo | - | - | |
| 3.1 | | | Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar | nd another | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | Check if this is community instructions) Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| | | | Check if this is community instructions) | property (see | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 12 of 71

| | Cheryl First Name | L Middle Name | Fox Last Name | Case numbe | er (if known) | |
|------|---|------------------|---|--|--|--|
| 3.3 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communinstructions) | nly s and another | the amount of any secu | claims or exemptions. Put ared claims on <i>Schedule D: hims Secured by Property.</i> Current value of the portion you own? |
| 3.4 | Make Model: Year: Approximate mileage: Other information: | <u> </u> | Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or | | the amount of any secu | claims or exemptions. Put ared claims on <i>Schedule D:</i> aims Secured by Property. Current value of the portion you own? |
| | | | At least one of the debtor Check if this is communinstructions) | | | |
| | nples: Boats, trailers, motors | | er recreational vehicles, other , fishing vessels, snowmobiles, | • | | |
| Exar | nples: Boats, trailers, motor No Yes | | er recreational vehicles, other | motorcycle accessori property? Check hly is and another | Do not deduct secured the amount of any secu | claims or exemptions. Put ired claims on <i>Schedule D:</i> ims Secured by Property. Current value of the portion you own? |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 13 of 71

| D | ebtor 1 | Cheryl First Name | L Middle Name | Fox Last Name | Case number (if known) | |
|----------|--------------------------------|----------------------------------|--|-----------------------------|-------------------------------------|---|
| Pa | art 3: | Describe Y | our Personal and Household I | | | |
| D | o you | own or have | e any legal or equitable intere | est in any of the follow | ring items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | - | and furnishings liances, furniture, linens, china, kitche | enware | | |
| <u>✓</u> | | Describe | Used Household Furniture | | | \$500.00 |
| | '. Elect Examp No | | s and radios; audio, video, stereo, an | d digital equipment; comp | uters, printers, scanners; music | |
| <u>~</u> | Yes. D | Describe | Cell Phone, TV, tablet | | | \$450.00 |
| | Examp | | ue ind figurines; paintings, prints, or oth in, or baseball card collections; other | | | |
| | No Yes. D | Describe | | | | |
| | | les: Sports, ph | rts and hobbies otographic, exercise, and other hobb s; carpentry tools; musical instrumen | | ol tables, golf clubs, skis; canoes | |
| ✓ | No Yes. D | Describe | | | | |
| | 0. Fire Examp | | es, shotguns, ammunition, and relate | ed equipment | | |
| ✓ | No | | | | | |
| | Yes. D | Describe | | | | |
| | | | clothes, furs, leather coats, designer v | wear, shoes, accessories | | |
| Щ | No Voc F |) ocoribo | Lland Olathia | | | |
| ✓ | Tes. L | Describe | Used Clothing | | | \$350.00 |
| | 2. Jew Examp | | ewelry, costume jewelry, engagemen r | t rings, wedding rings, hei | rloom jewelry, watches, gems, | |
| <u>✓</u> | | Describe | Costume Jewelry | | | \$30.00 |
| | | -farm animals les: Dogs, cats | s, birds, horses | | | |
| | | Describe | | | | |
| _ | _ | other person | al and household items you did no | ot already list, including | any health aids you did not list | |
| | No Yes. D | Describe | | | | |
| ш | I . 55. E | 23025 | | | | |
| | | | lue of all of your entries from Part number here | | for pages you have attached | \$1330.00 |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 14 of 71

| Debt | or 1 Cheryl | L | Fox | Case number (if known) | |
|--------------|--------------------------|--|----------------------------|--|--|
| | First Name | Middle Name | Last Name | | |
| Part 4 | Describe Your | r Financial Assets | | | |
| Doy | ou own or have a | ny legal or equitable interes | t in any of the following | g? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. C | | | | | |
| E | _ | have in your wallet, in your home, i | a safe deposit box, and or | n hand when you file your petition | |
| | ✓ No | | | | |
| | Yes | | | Cash: | |
| 17. | | savings, or other financial accounts institutions. If you have multiple ac | | ares in credit unions, brokerage houses, ution, list each. | |
| | No | | | | |
| | ✓ Yes | | Institution name: | | |
| | | 47.4.01.11 | TOF D | | # 400.00 |
| | | 17.1. Checking account: | TCF Bank | | \$130.00 |
| | | 17.2. Checking account: | | | - - |
| | | 17.3. Savings account: | | | |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| 18. | Examples: Bond fund | s, or publicly traded stocks ds, investment accounts with broke | rage firms, money market a | ccounts | |
| | ✓ No Yes | Institution or issuer name: | | | |
| | | - | | | - |
| | | | | | |
| 19. | | | ated and unincorporated | businesses, including an interest in | |
| | an LLC, partnership | , and joint venture | | | |
| | ✓ No Yes. Give specific | Name of entity | | % of ownership: | |
| | information about | | | | |
| | them | | | | |
| | | | | <u> </u> | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 15 of 71

| Deb | first Name | L Middle Name | Last Name | Case number (if known) | _ |
|-----|--|--|---|---|---|
| 20. | Government and corp Negotiable instruments | orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe | ble and non-negotiable checks, promissory no | tes, and money orders. | |
| | ✓ No Yes. Give specific information about them | Issuer name: | | | |
| | | | | | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in II | |), thrift savings accounts | s, or other pension or profit-sharing plans | |
| | ✓ No | Type of account: | Institution name: | | |
| | Yes. List each account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| 00 | 0 | Additional account: | - | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, publi | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| 0.0 | A | Other: | | and the second second | |
| 23. | Annuities (A contract for No Yes | or a periodic payment of money to | o you, either for life or fo | r a number of years) | |
| | | | | | |
| | | | | | |
| | | - | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 16 of 71

| Debto | or 1 Cheryl | L | Fox | Case number (if known) | |
|------------|--|--|--|---|---|
| 24. | | | Last Name a qualified ABLE program, or under | r a qualified state tuition program. | |
| | | 529A(b), and 529(b)(1). | | | |
| | | name and description. Sep | parately file the records of any interests | s.11 U.S.C. § 521(c): | |
| | | | | | |
| | | | | | |
| 25. | Trusts, equitable or fur exercisable for your be | | (other than anything listed in line | 1), and rights or powers | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 26. | | | and other intellectual property | | |
| | Examples: Internet doma | ain names, websites, procee | eds from royalties and licensing agreer | ments | |
| | Yes. Describe | | | | |
| 0.7 | | | | | |
| 27. | | and other general intangit nits, exclusive licenses, coop | perative association holdings, liquor lic | censes, professional licenses | |
| | ✓ No Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| Mon | ey or property owed | to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ey or property owed | | | | portion you own? Do not deduct secured |
| | | u | | Federal: | portion you own? Do not deduct secured |
| | Tax refunds owed to yo No Yes. Give specific infabout them, income you already filed | u formation cluding whether d the returns | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to yo No Yes. Give specific infabout them, income you already filed and the tax year | u formation cluding whether d the returns | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to yo No Yes. Give specific inf about them, inc you already filed and the tax year Family support | ormation cluding whether d the returns ars | support, child support, maintenance, c | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to yo No Yes. Give specific infabout them, income you already filed and the tax yea Family support Examples: Past due or lui | u formation cluding whether d the returns urs | support, child support, maintenance, c | State: Local: divorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to yo No Yes. Give specific inf about them, inc you already filed and the tax yea Family support Examples: Past due or lui | u formation cluding whether d the returns urs | support, child support, maintenance, o | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to yo No Yes. Give specific infabout them, income you already filed and the tax yea Family support Examples: Past due or lui | u formation cluding whether d the returns urs | support, child support, maintenance, o | State: Local: divorce settlement, property settlemen Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 |
| 28. | Tax refunds owed to yo No Yes. Give specific infabout them, income you already filed and the tax yea Family support Examples: Past due or lui | u formation cluding whether d the returns urs | support, child support, maintenance, o | State: Local: divorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 |
| 28. | Tax refunds owed to yo ✓ No Yes. Give specific infabout them, incomposed you already filed and the tax year Family support Examples: Past due or lui ✓ No Yes. Give specific inf | u formation cluding whether d the returns ars mp sum alimony, spousal s formation | support, child support, maintenance, o | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds owed to yo No Yes. Give specific infabout them, income you already filed and the tax year Family support Examples: Past due or lui No Yes. Give specific info | u formation cluding whether d the returns ars | ents, disability benefits, sick pay, vacat | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. 29. | Tax refunds owed to yo No Yes. Give specific inf about them, in you already filer and the tax yea Family support Examples: Past due or lui No Yes. Give specific inf Other amounts someon Examples: Unpaid wages Social Security | u formation cluding whether d the returns ars mp sum alimony, spousal s formation | ents, disability benefits, sick pay, vacat | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds owed to yo No Yes. Give specific inf about them, inc you already filer and the tax yea Family support Examples: Past due or lui No Yes. Give specific info Other amounts someon Examples: Unpaid wages Social Security | u formation cluding whether d the returns ars | ents, disability benefits, sick pay, vacat | State: Local: divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 17 of 71

| Deb | tor 1 Cheryl | L | Fox | Case number (if known) | |
|------|--|-------------------------------|-------------------------------|---|---|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance presented in Examples: Health, disability | | vings account (HSA); credit, | homeowner's, or renter's insurance | |
| | Yes. Name the insura of each policy and lis | ance company | pany name: | Beneficiary: | Surrender or refund value |
| 32. | | | | cy, or are currently entitled to receive | |
| 33. | | rties, whether or not you ha | | e a demand for payment | |
| 34. | Other contingent and uto set off claims No Yes. Describe | Inliquidated claims of every | nature, including counte | rclaims of the debtor and rights | |
| 35. | Any financial assets you No Yes. Describe | u did not already list | | | |
| 36. | | all of your entries from Par | | for pages you have attached | \$130.00 |
| Part | 5: Describe Any Bu | siness-Related Property | y You Own or Have an | Interest In. List any real estate in Par | t 1. |
| 37. | Do you own or have any | / legal or equitable interest | in any business-related p | roperty? | |
| | No. Go to Part 6. Yes. Go to line 38. | | | | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable or | commissions you already e | earned | | |
| | ✓ No Yes. Describe | | | | |
| 39. | Office equipment, furni Examples: Business-relat | | ems, printers, copiers, fax n | nachines, rugs, telephones, desks, chairs, elec | tronic devices |
| | No Yes. Describe | | | | |
| | | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 18 of 71

| Deb | tor 1 Cheryl | L | Fox | Case number (if known) | |
|----------|-------------------------|---|---|------------------------------------|------------------------------|
| l | First Name | Middle Name | Last Name | | _ |
| 40. | Machinery, fixtures, e | equipment, supplies you us | e in business, and tools of | your trade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 42. | Interests in partnersh | nips or joint ventures | | | |
| | ✓ No | | | | |
| | Yes. Give specific | N | ame of entity: | % of ownership: | |
| | information about | | | | |
| | them | _ | | | |
| | | _ | | | |
| | | _ | | | |
| 43. | Customer lists, mailing | lists, or other compilation | ıs | | |
| | ✓ No | | | | |
| | | nclude personally identifiable | information (as defined in 11 | U.S.C. § 101(41A))? | |
| | | , | (40 40 40 40 40 40 40 40 40 40 40 40 40 4 | 3 (| |
| | No | | | | |
| | Yes. Desc | ribe | | | |
| | _ | | | | |
| 44. | Any business-related | property you did not alrea | dy list | | |
| | ✓ No | | | | |
| | Yes. Give specific | _ | | | |
| | information | | | | <u> </u> |
| | | | | | |
| | | | | | |
| | | _ | | | _ |
| | | | | | |
| | | | | | <u> </u> |
| | | _ | | | |
| | | | | | |
| | | | | or pages you have attached | |
| • | art 3. Write that humbe | 51 Here | | | |
| Part | 6: Describe Any F | arm- and Commercial | Fishing-Related Proper | ty You Own or Have an Interest In. | |
| | If you own or have ar | n interest in farmland, list it in F | art 1. | | |
| 46. | Do you own or have a | ny legal or equitable inter | est in any farm- or comme | rcial fishing-related property? | |
| | No. Co to Dout 7 | | • | | Current value of the |
| | | | | | portion you own? |
| | Yes. Go to line 47 | • | | | Do not deduct secured claims |
| 17 | Farm animals | | | | or exemptions |
| 47. | Examples: Livestock, p | oultry, farm-raised fish | | | |
| | | •, | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 19 of 71

| Deb | tor 1 Cheryl | L Middle Nesse | FOX | Case number (if known) | |
|---|--|---|----------------------------|--------------------------------|-------------|
| | First Name | Middle Name | Last Name | | |
| 48. | Crops-either growing | or harvested | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 49. | Farm and fishing equi | pment, implements, machinery, fi | xtures, and tools of trade | • | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 50. | Farm and fishing supp | lies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 51. | Any farm- and comme | ercial fishing-related property you | did not already list | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| | | | | | |
| 52. A | dd the dollar value of a | II of your entries from Part 6, incl | uding any entries for pag | es vou have attached | |
| | | r here | | = - | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | 7: Describe All Pro | perty You Own or Have an In | terest in That You Dic | l Not List Above | |
| 53. | Do you have other pro | perty of any kind you did not alrea | ndy list? | | |
| | Examples: Season ticker | ts, country club membership | | | |
| | ✓ No | | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| | | | | | |
| 54 A | dd the dollar value of a | II of your entries from Part 7. Writ | e that number here | | • |
| | aa tiio aonai valao oi a | or your onchoo nom r are rr time | o that hambor horo mini | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part | 8: List the Totals o | f Each Part of this Form | | | |
| | | | | | |
| 55. I | Part 1: Total real estate | e, line 2 | | ▶ | |
| | | | | | |
| | | | | | |
| 56. լ | oart 2 total vehicles, lir | | | <u> </u> | |
| 56. լ | | ne 5 nd household items, line 15 | \$1330.00 | <u> </u> | |
| 56. _I | | nd household items, line 15 | | _ | |
| 56. _I 57. F 58. F | art 3: Total personal a art 4: Total financial a | nd household items, line 15 ssets, line 36 | \$1330.00 \$130.00 | | |
| 56. _I 57. F 58. F | art 3: Total personal a art 4: Total financial a | nd household items, line 15 | | | |
| 56. _I 57. F 58. F 59. I | 'art 3: Total personal a 'art 4: Total financial a Part 5: Total business-r | nd household items, line 15 ssets, line 36 | | | |
| 56. I 57. F 58. F 59. I | 'art 3: Total personal a 'art 4: Total financial a Part 5: Total business-r | nd household items, line 15 ssets, line 36 related property, line 45 fishing-related property, line 52 | | | |
| 56. I 57. F 58. F 59. I 60. I | Part 3: Total personal a Part 4: Total financial a Part 5: Total business-r Part 6: Total farm- and Part 7: Total other prop | nd household items, line 15 ssets, line 36 elated property, line 45 fishing-related property, line 52 perty not listed, line 54 | \$130.00 | | |
| 56. I 57. F 58. F 59. I 60. I | Part 3: Total personal a Part 4: Total financial a Part 5: Total business-r Part 6: Total farm- and Part 7: Total other prop | nd household items, line 15 ssets, line 36 related property, line 45 fishing-related property, line 52 | \$130.00 | | + \$1460.00 |
| 56. I 57. F 58. F 59. I 60. I | Part 3: Total personal a Part 4: Total financial a Part 5: Total business-r Part 6: Total farm- and Part 7: Total other prop | nd household items, line 15 ssets, line 36 elated property, line 45 fishing-related property, line 52 perty not listed, line 54 | \$130.00 | Copy personal property total ▶ | + \$1460.00 |
| 56. I 57. F 58. F 59. I 60. I | Part 3: Total personal a Part 4: Total financial a Part 5: Total business-r Part 6: Total farm- and Part 7: Total other prop | nd household items, line 15 ssets, line 36 elated property, line 45 fishing-related property, line 52 perty not listed, line 54 | \$130.00 | Copy personal property total ▶ | + \$1460.00 |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 20 of 71

| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|
| Debtor 1 | Cheryl | L | Fox | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | | | (State) | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pai | Part 1: Identify the Property You Claim as Exempt | | | | | | | |
|-----|---|---|---|------------------------------------|--|--|--|--|
| 1. | | | | | | | | |
| | You are claiming state and federal | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | | | | | |
| | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A | /B that you claim as e | xempt, fill in the information below. | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | |
| | Brief description: Checking account, TCF Bank Line from Schedule A/B: 17 | \$130.00 | \$130.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | |
| | Brief | | | 735 ILCS 5/12-1001(b) | | | | |
| | description: | \$500.00 | \$500.00 | | | | | |
| | Used Household Furniture | | 100% of fair market value, up to any | _ | | | | |
| | Line from Schedule A/B: 06 | | applicable statutory limit | | | | | |
| 3. | Are you claiming a homestead exempti (Subject to adjustment on 4/01/19 and evi | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? | | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 21 of 71

| Debtor 1 Ch | | | ox Case number (if known) | <u> </u> |
|--------------------|---------------------------------|-------------------------------------|---|------------------------------------|
| | | dle Name L | ast Name | |
| Part 2: AC | dditional Page | | | |
| | escription of the property and | Current value of | Amount of the exemption you claim | Specific laws that allow exemption |
| line on propert | Schedule A/B that lists this ty | the portion you own | Check only one box for each exemption. | |
| | | Copy the value from Schedule A/B | | |
| Brief | | | | 735 ILCS 5/12-1001(a) |
| descript Use | tion: ed Clothing | \$350.00 | \$350.00 | _ |
| Line fro Schedu | m | | 100% of fair market value, up to any applicable statutory limit | |
| Brief | | | | 735 ILCS 5/12-1001(b) |
| descript | tion: II Phone, TV, tablet | \$450.00 | \$450.00 | |
| Line fro Schedu | om . | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief | | | | 735 ILCS 5/12-1001(b) |
| descript | | \$30.00 | \$30.00 | |
| Co | stume Jewelry | | 100% of fair market value, up to any | _ |
| Line fro | | | applicable statutory limit | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 22 of 71

| Fill in t | nis information to identify you | r case: | | | | |
|-------------|-------------------------------------|---------------------------------|--|---------------------------|---|-----------------------------------|
| Debtor | 1 Cheryl | L | Fox | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor | | | | | | |
| (Spouse, | iffiling) First Name | Middle Name | Last Name | | | |
| United | States Bankruptcy Court for th | e: Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case n | | | | | | |
| , | cial Form 106D |) | | | | Check if this is an |
| | | _ | | | | unended illing |
| Sch | edule D: Cred | litors Who Ha | ave Claims Secu | red by Prop | erty | 12/15 |
| more s | | | ple are filing together, both are e umber the entries, and attach it t | | | |
| 1. D | o any creditors have claim | s secured by your prop | erty? | | | |
| - | No. Check this box and si | ubmit this form to the cou | rt with your other schedules. You h | nave nothing else to repo | ort on this form. | |
| | Yes. Fill in all of the information | ation below. | | | | |
| Part 1 | List All Secured Claim | s | | | | |
| fo | | creditor has a particular clair | cured claim, list the creditor separatel m, list the other creditors in Part 2. A ding to the creditor's name. | - | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 23 of 71

| | n this inforr | nation to identify your c | ase: | | | | | |
|--------------------------------|--|--|--|---|---|--------------------------|-----------------------------------|-------------------------------|
| Deb | tor 1 | Cheryl | L | Fox | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | otor 2 | | | | | | | |
| (Spo | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unit | ted States B | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| 0 | | | | (State) | | | | |
| (If kn | e number own) | | | | | | | |
| Off | ficial F | orm 106E/F | | | | Che | eck if this is an | n amended filing |
| | | | | | | | | |
| Sc | chedu | ıle E/F: Cre | ditors Who | Have Unsec | cured Claims | | | 12/15 |
| Form clain the e knov | n 106Å/B) ans that are entries in the vn). | and on Schedule G: Exe listed in Schedule D: C he boxes on the left. At | cutory Contracts and Une reditors Who Hold Claims | xpired Leases (Official Fo Secured by Property. If r | Also list executory contracts orm 106G). Do not include a nore space is needed, copy op of any additional pages, v | ny credito the Part y | rs with partia ou need, fill i | ally secured t out, number |
| 1. | Do any cr | editors have priority un | secured claims against yo | ou? | | | | |
| | No. 0 | Go to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, ider As much a Continuati | ntify what type of claim it as possible, list the claims on Page of Part 1. If mor | is. If a claim has both priority | y and nonpriority amounts, ling to the creditor's name. particular claim, list the othe | | both priority | y and nonprio | rity amounts. |
| | | | | | | Total | Priority | Nonpriority |
| | | | | | | claim | amount | amount |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 24 of 71

| Debto | or 1 Cheryl First Name | L Middle Name | Fox e Last Name | Case number (if known) | |
|--------|--|--|--------------------------|--|-------------------|
| Part 2 | | ur NONPRIORITY Unse | | | |
| 3. [| No. You have i | ave nonpriority unsecured | claims against you? | he court with your other schedules. | |
| 4. L | List all of your nonpursecured claim, list | the creditor separately for ea | ch claim. For each claim | ler of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already in a Part 3.If you have more than four priority unsecured claims fill out | cluded in Part 1. |
| _ | | | | | Total claim |
| 4.1 | Nonpriority Credito | Parking and red Light Tickets or's Name venue - PO Box 88292 | <u> </u> | Last 4 digits of account number When was the debt incurred? n/a | \$7,300.00 |
| | Number | Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | | Contingent | |
| | Chicago | Illinois | 60680 | Unliquidated | |
| | City | State e debt? Check one. | Zip Code | Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and | Debtor 2 only | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 브 | f the debtors and another | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subje | claim relates to a commu ect to offset? | inity debt | Other. Specify Parking Tickets | |
| | ✓ No Yes | | | | |
| 4.2 | ENHANCED RECO | OVERY CO L | | Last 4 digits of account number 4609 | \$101.00 |
| | Nonpriority Credito 8014 BAYBERRY | | | When was the debt incurred? 11/2017 | |
| | Number Stree | et | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | JACKSONVILLE City | Florida State | 32256 Zip Code | Unliquidated | |
| | Who incurred the | e debt? Check one. | Zip Code | Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and | - | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 브 | f the debtors and another claim relates to a commu | nitv debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subje | | , | | |
| | ✓ No | | | ORIGINAL CREDITOR: COMCAST Other. Specify CABLE COMMUNICATIONS | |
| 1 | Yes | 055105.0 | | | |
| 4.3 | SOC SEC ADMIN (Nonpriority Credito | | | Last 4 digits of account number 86A0 | \$21,122.00 |
| | 155-10 JAMAICA Number Stree | AVE | | When was the debt incurred? 12/2013 | |
| | - Street | ei. | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | JAMAICA | New York | 11432 | | |
| | City | State | Zip Code | Unliquidated | |
| | Debtor 1 only | e debt? Check one. | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and | Debtor 2 only | | Student loans Obligations arising out of a soparation agreement or | |
| | 브 | f the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 브 | claim relates to a commu | mity deht | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subje | | , 4001 | ─ debts ✓ Other. Specify 001 InstallmentLoan | |
| | ✓ No | | | | |
| | Yes | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 25 of 71

Debtor 1 Cheryl Fox Case number (if known) First Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 U S DEPT OF ED/GSL/ATL \$11,667.00 Last 4 digits of account number 5192 Nonpriority Creditor's Name When was the debt incurred? 7/2011 PO BOX 2287 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ATLANTA** 30301 Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL \$9,068.00 Last 4 digits of account number 6713 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 7/2011 Number Street As of the date you file, the claim is: Check all that apply. Contingent ATLANTA Georgia 30301 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ Is the claim subject to offset?

✓ No Yes

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 26 of 71

| Debto | or 1 Cheryl First Name | | L Middle Name | Fox Last Name | Case number (if known) |
|--------|-------------------------------|--|---|--|--|
| Part 3 | | to Be Notified A | | at You Already Liste | ed |
| c c | collection agence | cy is trying to colle by here. Similarly, i | ct from you for a c f you have more th | debt you owe to some on the come of the co | , for a debt that you already listed in Parts 1 or 2. For example, if a one else, list the original creditor in Parts 1 or 2, then list the ny of the debts that you listed in Parts 1 or 2, list the additional debts in Parts 1 or 2, do not fill out or submit this page. |
| | HARRIS & HARRI Name | SLTD | | On which entr | ry in Part 1 or Part 2 did you list the original creditor? |
| | 111 W JACKSON Number Stree | | | Line 4.1 | of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| | CHICAGO City | Illinois State | 60604 Zip Code | Last 4 digits o | of account number |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 27 of 71

 Debtor 1
 Cheryl
 L
 Fox
 Case number (if known)

 First Name
 Middle Name
 Last Name

| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | | |
|--------------------------|---|--------|----------------------------|-----------|
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for st | tatistical reporting purpo | oses only |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| nom ruit i | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 | |
| | amount here. | | \$0.00 | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$20,735.00 | |
| nom rait 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$28,523.00 | |
| | G: Total Add lines Of through G: | c: | \$49,258.00 | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 28 of 71

| Fill in this infor | mation to identify your c | ase: | | |
|---------------------|---------------------------|-------------|----------------------|----------|
| Debtor 1 | Cheryl | L | Fox | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | <u>.</u> |
| Case number | | | | |
| (If known) | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 29 of 71

| | | טט | cument Pay | le 29 01 / I |
|---------------------------|---|--------------------------------|--------------------------|---|
| Fill in this | information to identify your | case: | | |
| Debtor 1 | Cheryl | L | Fox | |
| Dahtano | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse, if t | First Name | Middle Name | Last Name | |
| United St | ates Bankruptcy Court for the | Northern | District of Illinois | |
| Case nur | nber | | (State) | |
| (If known) | | | | |
| | | | | Check if this is an amended filing |
| Offic | ial Form 106H | | | _ |
| | | | | |
| Sche | dule H: Your Co | debtors | | 12/15 |
| 1. Do y | ou have any codebtors? (If y No Yes | | · | |
| | o, Louisiana, Nevada, New Me | | | ?? (Community property states and territories include Arizona, California, in.) |
| ✓ | No. Go to line 3. | | | |
| | Yes. Did your spouse, form | ner spouse, or legal equival | ent live with you at the | time? |
| | No No In which commun | ity state or territory did you | livo? | Fill in the name and current address of that person. |
| | Tes. III WINCII COMINUI | ity state of territory did you | IIV 6 : | Fill in the name and current address of that person. |
| | Name of your spouse, | former spouse, or legal equi | valent | |
| | Number Street | | | |
| | City | State | Zip Co | ode |
| 3 In C | olumn 1 list all of your code | ahtors Do not include your | ennues as a codebtor | r if your spouse is filing with you. List the person shown in line 2 |
| J O | | | | have listed the areditor on Cahadula D (Official Form 106D) |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 30 of 71

| Fill in this information to identify | y your case: | | - | | |
|---|--|--------------------------|-------------------|-------------------|--|
| Debtor 1 Cheryl First Name Debtor 2 | L Middle Name | Fox Last N | ame | | eck if this is: |
| (Spouse, if filing) First Name | Middle Name | Last N | ame | | An amended filing |
| United States Bankruptcy Court for the: Case number (If known) | Northern | _ District of Illi (S | nois State) | - - | A supplement showing post-petition chapter 13 expenses as of the following date: |
| , | | | | | MM / DD / YYYY |
| Official Form 106l | | | | | |
| Schedule I: Your Ir | ncome | | | | 12/15 |
| | d, attach a separate she ry question. | | | | not include information about your ional pages, write your name and case |
| Fill in your employment information. | | Debtor 1 | | | Debtor 2 |
| If you have more than one job, attach a separate page with information about additional | Employment status | Emplo | yed mployed | | Employed Not Employed |
| employers. Include part time, seasonal, or | Occupation Employer's name | Oten Due el | | Olassain s | |
| self-employed work. | Employer's address | Services | Construction & | Cleaning | _ |
| Occupation may include student or homemaker, if it applies. | | 3936 W 1 Number Str | | | Number Street |
| | | Chicago City | Illinois State | 60623 Zip Code | City State Zip Code |
| | How long employed there? | 4 months | | | |
| Part 2: Give Details About | Monthly Income | | | | |
| spouse unless you are separated. | ve more than one employer, | - | information for | | write \$0 in the space. Include your non-filing or that person on the lines below. If you need |
| List monthly gross wages, sa deductions.) If not paid monthl be. | | | 2. | \$2,600.00 | non-filing spouse |
| 3. Estimate and list monthly over | ertime pay. | | 3. | + \$0.00 | |
| 4. Calculate gross income. Add | line 2 + line 3. | | 4. | \$2,600.00 | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 31 of 71

| Deb | tor 1Cheryl First Name | | Fox Last Name | | Case number | | | |
|-----------------------|---|---|------------------|------------|------------------------|-----------------------------------|-------|-------------------------|
| | riist Name | Mildule Name L | Last Name | | For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| C | opy line 4 here | | → 4 | ا. " | \$2,600.00 | | | |
| | st all payroll dedu | | | | | | | |
| | | and Social Security deductions | 5 | ia. | \$437.49 | | | |
| 5 | b. Mandatory con | tributions for retirement plans | 5 | ib. | \$0.00 | | | |
| 5 | c. Voluntary conti | ributions for retirement plans | 5 | ic. | \$0.00 | | | |
| 5 | d. Required repay | ments of retirement fund loans | 5 | id. | \$0.00 | | | |
| 5 | e. Insurance | | 5 | ie. | \$0.00 | | | |
| 5 | f. Domestic suppo | ort obligations | 5 | if. | \$0.00 | | | |
| 5 | g. Union dues | | 5 | ig. | \$0.00 | | | |
| 5 | h. Other deduction | ons. Specify: | 5 | ih. + | \$0.00 + | | | |
| 6. A c +5h. | | luctions. Add lines 5a + 5b + 5c + 5d + 5e +5t | f + 5g 6 | S. | \$437.49 | | | |
| 7. C a | alculate total moi | nthly take-home pay. Subtract line 6 from line | e 4. 7 | ' . | \$2,162.51 | | | |
| 8. Li | st all other incom | ne regularly received: | | | | | | |
| 8 | business, profe | • | | | | | | |
| | | ent for each property and business showing ordinary and necessary business expenses, and | | | | | | |
| | the total monthly | y net income. | 8 | Ba. | \$0.00 | | | |
| 8 | b. Interest and di | vidends | 8 | Bb. | \$0.00 | | | |
| 8 | dependent regi | - | | | | | | |
| | | spousal support, child support, maintenance, nt, and property settlement. | | Bc. | \$0.00 | | | |
| 8 | d. Unemployment | compensation | 8 | ßd. | \$0.00 | | | |
| 8 | e. Social Security | | 8 | Be. | \$0.00 | | | |
| 8 | Include cash ass cash assistance t | ent assistance that you regularly receive istance and the value (if known) of any non-that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es | | ßf. | \$0.00 | | | |
| 8 | g. Pension or reti | rement income | 8 | ßg. | \$0.00 | | | |
| 8 | h. Other monthly | income. Specify: | 8 | 8h. + | \$0.00 + | | | |
| 9. A d | dd all other incom | ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + | + 8h. 9 |). | \$0.00 | | | |
| | | income. Add line 7 + line 9. e 10 for Debtor 1 and Debtor 2 or non-filing sp | | 0. | \$2,162.51 + | | = | \$2,162.51 |
| lr fr | nclude contribution iends or relatives. | gular contributions to the expenses that you s from an unmarried partner, members of your amounts already included in lines 2-10 or amou | household | , your o | dependents, your roomn | , | | |
| s | pecify: | | | | | | 11. + | \$0.00 |
| | | n the last column of line 10 to the amount in n the Summary of Schedules and Statistical Sui | | | | | 12. | \$2,162.51 |
| | | | | | | | | Combined monthly income |
| 13. | No. | increase or decrease within the year after y | you file thi | s form | ? | | | |
| | Yes. Explain: | | | | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 32 of 71

| | | Duct | illielit Page 32 01 7. | _ | | |
|---------------------------------|---|--|---|-------------------------------|---------------------|-------------------------------|
| Fill in this info | rmation to identify | your case: | | | | |
| Debtor 1 | Cheryl | L | Fox | | | |
| Dahta :: 0 | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended fili | ng | |
| United States | Bankruptcy Court fo | or the: Northern [| District of Illinois (State) | A supplement s expenses as of | | -petition chapter 13 date: |
| Case number (If known) | | | | MM / DD / YYY | Υ | |
| Official | Form 10 | 6J | | | | |
| Schedul | e J: Your | Expenses | | | | 12/1 |
| information. If | | s possible. If two married people a eded, attach another sheet to this | | | | |
| | cribe Your Hou | | | | | |
| 1. Is this a jo | | SCHOIG | | | | |
| | o to line 2 | | | | | |
| | | in a separate household? | | | | |
| 1es. L | _ | m a separate nousenoiu: | | | | |
| | No Dalata () | and the Official Forms 100 LO. Forms | and for Committee Household of Deb | i- :: 0 | | |
| 0.0. | | nust file Official Forms 106J-2, Exper | ises for Separate Houseffold of Dept | Of 2. | | |
| _ | ve dependents? Debtor 1 and | No | | | | |
| Debtor 2. | Debtor r and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does de with you | pendent live ? |
| | | | Child | 11 years | No. | |
| | | | Ohild | 15 | Yes. | |
| | | | Child | 15 years | Yes. | |
| | penses include | | | | | |
| than | of people other | | | | | |
| yourself an dependent | • | Yes | | | | |
| Part 2: Esti | mate Your Ong | oing Monthly Expenses | | | | |
| - | of a date after the | our bankruptcy filing date unless y bankruptcy is filed. If this is a sup | = | - | | |
| | • | non-cash government assistance uded it on <i>Schedule I: Your Incom</i> e | - | | | Your expenses |
| | I or home owners or the ground or lo | hip expenses for your residence. In t. 4. | clude first mortgage payments and | | 4. | \$800.00 |
| If not inc | luded in line 4: | | | | | |
| 4a. Real e | estate taxes | | | | 4a | \$0.00 |
| 4b. Prope | erty, homeowner's. | or renter's insurance | | | 4h | \$0.00 |

\$0.00

\$0.00

4c.

4d.

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 33 of 71

Debtor 1 Cheryl L Fox Case number (if known)
First Name Middle Name Last Name

| First Name | Middle Name Last Name | | |
|---|---|-----|---------------|
| | | | Your expenses |
| 5. Additional mortgage payments t | for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural gas | | 6a. | \$0.00 |
| 6b. Water, sewer, garbage collection | on | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Interne | et, satellite, and cable services | 6c. | \$50.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping supplies | | 7. | \$687.51 |
| 8. Childcare and children's educat | tion costs | 8. | \$50.00 |
| 9. Clothing, laundry, and dry clean | ing | 9. | \$120.00 |
| 10. Personal care products and se | ervices | 10. | \$180.00 |
| 11. Medical and dental expenses | | 11. | \$0.00 |
| 12. Transportation. Include gas, ma Do not include car payments | aintenance, bus or train fare. | 12. | \$125.00 |
| 13. Entertainment, clubs, recreation | on, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions and re | eligious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance deducted | ed from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$0.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$0.00 |
| 15d. Other insurance. Specify: | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes dedu | ucted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payments: | : | 10 | |
| 17a. Car payments for Vehicle 1 | | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| 17d. Other. Specify: | _ | 17d | \$0.00 |
| 18. Your payments of alimony, mai | intenance, and support that you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, | Your Income (Official Form 106I). | 18. | |
| | upport others who do not live with you. | | |
| Specify: | | 19. | \$0.00 |
| | ot included in lines 4 or 5 of this form or on Schedule I: Your Income. | | . . |
| 20a. Mortgages on other property | | 20a | \$0.00 |
| 20b. Real estate taxes. | | 20b | \$0.00 |
| 20c. Property, homeowner's, or re | | 20c | \$0.00 |
| 20d. Maintenance, repair, and upk | | 20d | \$0.00 |
| 20e. Homeowner's association or | condominium dues | 20e | \$0.00 |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 34 of 71

| Debtor 1 Cheryl | L | Fox | Case number (if known) | | |
|-------------------------------|---|-------------------------------|------------------------|-----|------------|
| First Name | Middle Name | Last Name | | | |
| 21.Other. Specify: | | | | 21 | \$0.00 |
| | | | | | |
| 22. Calculate your monthly e | expenses. | | | | \$2,012.51 |
| 22a. Add lines 4 through 21 | 1. | | | | \$0.00 |
| 22b. Copy line 22 (monthly | expenses for Debtor 2), if any | , from Official Form 106J-2 | | | \$2,012.51 |
| 22c. Add line 22a and 22b. | The result is your monthly exp | enses. | | 22. | |
| 23. Calculate your monthly no | et income. | | | | |
| 23a. Copy line 12 (your con | nbined monthly income) from | Schedule I. | | 23a | \$2,162.51 |
| 23b. Copy your monthly ex | penses from line 22 above. | | | 23b | \$2,012.51 |
| | expenses from your monthly | ncome. | | | \$150.00 |
| The result is your mon | nthly net income. | | | 23c | |
| | ct to finish paying for your car ease or decrease because of a | loan within the year or do yo | ou expect your | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 35 of 71

| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------------------------|--|--|
| Debtor 1 | Cheryl | L | Fox | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | |
| Case number (If known) | | | (State) | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | |
|-----|---|---|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | |
| | ✓ No | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | |
| | | | | | | |
| | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary a | and schedules filed with this declaration and | | | | |
| | that they are true and correct. | | | | | |
| × | /s/ Cheryl Fox | × | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | |
| | Date 4/13/2018 | Date | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 36 of 71

| Fill in this infor | rmation to identify your c | ase: | | - | | | |
|------------------------------|--|---|----------------------------|-------------------|-------------|-------------------|------------------------------------|
| Debtor 1 | Cheryl | L | Fox | | | | |
| Debtor 2 | First Name | Middle Na | ıme Last Nam | е | | | |
| (Spouse, if filing) | First Name | Middle Na | me Last Nam | е | | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illino (Stat | | | | |
| Case number (If known) | | | (| | | | |
| Official | Form 107 | | | | _ | | Check if this is ar amended filing |
| | nt of Financia | l Affairs fo | r Individuals | Filina for | Bankru | ıptcv | 04/16 |
| Be as comple information. | ete and accurate as pos If more space is neede lown). Answer every qu | ssible. If two mar d, attach a separ | ried people are filing | together, both | are equally | responsible for s | |
| Part 1: Give | e Details About Your | Marital Status a | nd Where You Lived | Before | | | |
| 1. What is | your current marital sta | tus? | | | | | |
| ш . | rried t married | | | | | | |
| 2. During | the last 3 years, have yo | u lived anywhere o | other than where you liv | ve now? | | | |
| ✓ No ☐ Yes | s. List all of the places yo | u lived in the last 3 | 3 years. Do not include v | where you live no | DW. | | |
| De | btor 1: | | Dates Debtor 1 lived there | Debtor 2: | | | Dates Debtor 2 lived there |
| | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| Nu | mber Street | | From | Number Stree | t | | From To |
| City | y State | Zip Code | | City | State | Zip Code | |
| | | | | Same as | Debtor 1 | | Same as Debtor 1 |
| Nu: | mber Street | | From To | Number Stree | t | | From To |
| City | y State | Zip Code | | City | State | Zip Code | |
| and territo | e last 8 years, did you eo ories include Arizona, Califo Make sure you fill out Sc | rnia, Idaho, Louisia | na, Nevada, New Mexico, | Puerto Rico, Tex | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 37 of 71

| ebtor 1 Cheryl L First Name Middle | Name Last N | | number (if known) | |
|---|---|---|--|---|
| art 2: Explain the Sources of Your Inc | come | | | |
| Did you have any income from employm Fill in the total amount of income you receiv activities. If you are filing a joint case and you No Yes. Fill in the details. | ent or from operating a by | sinesses, including part-time | • | years? |
| _ | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | Wages, commissions, bonuses, tips Operating a business | \$6000.00 | Wages, commissions, bonuses, tips Operating a business | |
| For last calendar year: (January 1 to December 31, 2017) YYYY | Wages, commissions, bonuses, tips ✓ Operating a business | \$2000.00 | Wages, commissions, bonuses, tips Operating a business | |
| For the calendar year before that: (January 1 to December 31, 2016) YYYY | Wages, commissions, bonuses, tips Operating a business | \$3000.00 | Wages, commissions, bonuses, tips Operating a business | |
| Include income regardless of whether that in public benefit payments; pensions; rental infiling a joint case and you have income that List each source and the gross income from No Yes. Fill in the details. | come; interest; dividends; r you received together, list | money collected from lawsuits; it only once under Debtor 1. | ; royalties; and gambling and | |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions an exclusions) |
| From January 1 of current year until the date you filed for bankruptcy: | | \$0.00 | | |
| For last calendar year: (January 1 to December 31, 2017) YYYY | Est. 2017 LINK | \$6,300.00 | | |
| For the calendar year before that: (January 1 to December 31, 2016) YYYY | Est. 2016 LINK | \$7,560.00 | | |
| | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 38 of 71

Fox Debtor 1 Cheryl Case number (if known) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors Other

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 39 of 71

| siders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; proporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing jent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, ich as child support and alimony. |
|---|
| Yes. List all payments to an insider. Dates of payment Paid Amount you still owe Insider's Name Number Street City State Zip Code Insider's Name |
| Yes. List all payments to an insider. Dates of payment Dates of payment Total amount you still owe Reason for this payment Reason for this payment City State Zip Code Insider's Name |
| Yes. List all payments to an insider. Dates of payment Paid Amount you still owe Insider's Name Number Street City State Zip Code Insider's Name |
| Dates of payment Paid Amount you still owe Insider's Name Number Street City State Zip Code Insider's Name |
| Number Street City State Zip Code Insider's Name |
| City State Zip Code Insider's Name |
| Insider's Name |
| |
| Number Street |
| |
| City State Zip Code |
| insider? Include payments on debts guaranteed or cosigned by an insider. ✓ No ✓ Yes. List all payments that benefited an insider. Dates of payment paid Amount you still owe Reason for this payment |
| Insider's Name |
| model 3 Name |
| Number Street |
| City State Zip Code |
| Insider's Name |
| Number Street |
| City State Zip Code |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 40 of 71

| Deb | tor 1 | Cheryl First Name | L Middle Name | Fox Last Name | Case | number <i>(if knowi</i> | 7) | |
|------|--------|--------------------------------|--|-------------------|------------------------|-------------------------|--------|-----------------------|
| Part | 4: | Identify Legal Ac | tions, Repossessions, an | d Foreclosures | | | | |
| | List a | | ı filed for bankruptcy, were y ding personal injury cases, sm | | | | | |
| | _ | No Yes. Fill in the detail: | S. | | | | | |
| | | | Natur | re of the case | Court or agen | су | | Status of the case |
| | | Case title | | | - | | | Pending |
| | | Case number | | | Court Name | | | On appeal |
| | | | | | NumberStreet | | | Concluded |
| | | | | | City | State Zi | p Code | |
| | | Case title | | | Court Name | | | Pending |
| | | Case number | _ | | | | | On appeal |
| | | | | | NumberStreet | | | Concluded |
| | | | | | City | State Zi | p Code | |
| | | Yes. Fill in the infor | mation below. | Describe the prop | erty | | Date | Value of the property |
| | | Creditor's Name | | | | | | |
| | | Croditor o Hamo | | Explain what happ | ened | | | |
| | | Number Street | _ | | | | | |
| | | | | Property was re | • | | | |
| | | | | Property was g | | | | |
| | | City | State Zip Code | Property was at | ttached, seized, or le | vied. | | |
| | | | | Describe the prop | erty | | Date | Value of the property |
| | | Creditor's Name | | Explain what happ | onod | | | |
| | | Number Street | | слугані мнас нарр | eneu | | | |
| | | | | Property was re | epossessed. | | | |
| | | | | Property was fo | | | | |
| | | City | State Zip Code | Property was g | | wied | | |
| | | | · | Property was at | ttached, seized, or le | viea. | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 41 of 71

| Debto | r 1 Cheryl | L | Fox | Case number (if known) | |
|--------|--|-----------------------|--------------------------------|---|----------------------------|
| | First Name | Middle Name | Last Name | | |
| | Within 90 days before you file accounts or refuse to make | | | ank or financial institution, set off any | amounts from your |
| | No Yes. Fill in the details. | | | | |
| | _ | | Describe the action the | creditor took Date ac was tak | |
| | Creditor's Name | | - | | |
| | Number Street | | = | | |
| | | | _ Last 4 digits of account n | number: XXXX- | |
| | City State | Zip Code | - | | |
| | Within 1 year before you filed appointed receiver, a custod | | | possession of an assignee for the bene | fit of creditors, a court- |
| [| ✓ No Yes | | | | |
| Part 5 | List Certain Gifts and | Contributions | | | |
| 13. | Within 2 years before you fil | ed for bankruptcy, di | d you give any gifts with a to | otal value of more than \$600 per perso | on? |
| | No Yes. Fill in the details for | each gift. | | | |
| | Gifts with a total value of per person | of more than \$600 | Describe the gifts | Dates y gave the gifts | |
| | | | | | |
| | Person to Whom You Gav | re the Gift | - | | |
| | Number Street | | - | | |
| | City State Person's relationship to yo | Zip Code | - | | |
| | | | | | |
| | Person to Whom You Gav | re the Gift | - | | |
| | Number Street | | - | | |
| | City State Person's relationship to yo | Zip Code ou | - | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 42 of 71

| btor 1 | Cheryl | L | Fox | Case number (if know | wn) | |
|----------|--|--------------------------|--|--------------------------|--------------------|---------------------------|
| | First Name | Middle Name | Last Name | <u> </u> | | |
| Wit | | | | | | |
| Wit | hin 2 years before you f | iled for bankruptcy, di | d you give any gifts or contribu | tions with a total value | of more than \$600 | to any charity? |
| ✓ | No | | | | | |
| П | Yes. Fill in the details for | or each gift or contribu | tion. | | | |
| | Gifts or contributions | - | Describe what you contri | hutad | Date you | Value |
| | that total more than \$ | | Describe what you contin | buteu | contributed | value |
| | | | | | | |
| | 01 11 1 11 | | _ | | | |
| | Charity's Name | | | | | |
| | | | _ | | | |
| | Number Street | | _ | | | |
| | Number Street | | | | | |
| | City State | e Zip Code | _ | | | |
| | , | | | | | |
| 6: | List Certain Losses | | | | | |
| | nbling? No Yes. Fill in the details. | | ince you filed for bankruptcy, d | | | , |
| ш | | | Describe and income | | Data afarana | Value of succession |
| | Describe the property how the loss occurred | | Describe any insurance of Include the amount that ins | | Date of your loss | Value of property lost |
| | | | pending insurance claims o | | | |
| | | | A/B: Property. | | | |
| | | | | | | |
| | List Certain Paymer | | | | | |
| | No | | | | | |
| ✓ | Yes. Fill in the details. | | | | | |
| | | | Description and value of a | any property | Date payment | Amount of |
| | | | transferred | | or transfer | payment |
| | Cara was I am Firms | | 4 | | was made | \$050.00 |
| | Semrad Law Firm Person Who Was Paid | | _ Attorney's Fee - 350.00 | | 4/11/2018 | \$350.00 |
| | 20 S. Clark Street | | | | | |
| | Number Street | | _ | | | |
| | 28th Floor | | | | | |
| | | | - | | | |
| | Chicago Illino | | _ | | | |
| | City State | z Zip Code | | | | |
| | Email or website addres | S | _ | | | |
| | | | _ | | | |
| | Person Who Made the F | Payment, if Not You | | | | |
| | | | _ | | 1 | |
| | Person Who Was Paid | | _ | | | |
| | Normalia and Object | | _ | | | |
| | Number Street | | | | | |
| | | | _ | | | |
| | _ | | _ | | | |
| | City State | e Zip Code | | | | |
| | | | | | | |
| | Fmail or website address | 9 | - | | | |
| | Email or website addres | s | _ | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 43 of 71

| Debt | or 1 | Cheryl | L | Fox Ca | se number <i>(if known)</i> | | |
|------|-------|--|--|---|--------------------------------------|--|----------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | you deal with your cre | | you or anyone else acting on your beha nents to your creditors? on line 16. | alf pay or transfer | any property to a | nyone who promised to |
| | | No Yes. Fill in the details. | | | | | |
| | | | | Description and value of any prop transferred | erty | Date payment or transfer was made | Amount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | e Zip Code | | | | |
| | Inclu | ude both outright transfer | business or financial at a sand transfers made as salready listed on this stater | security (such as the granting of a security nent. | | | |
| | | | | Description and value of property transferred | Describe any payments re in exchange | y property or ceived or debts p | Date aid transfer was made |
| | | Person Who Received T | ransfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to | • | | | | |
| | | Person Who Received T | ransfer | | | | |
| | | Number Street | | • | | | |
| | | City State Person's relationship to | | | | | |
| 19. | ben | eficiary? ese are often called asset- No | | d you transfer any property to a self-se | ettled trust or sim | ilar device of whic | ch you are a |
| | Ц | Yes. Fill in the details. | | Description and value of the pro | perty transferred | | Date transfer was made |
| | | Name of trust | | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 44 of 71

Debtor 1 Cheryl Case number (if known) List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code City State Zip Code

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 45 of 71

| Debt | or 1 | Cheryl L | | -ox | Case | e number <i>(if known</i>) | |
|------|-------------|---|-----------------|-----------------|-----------------------|---|-------------|
| | | First Name Middle Name | L | ast Name | | | |
| Part | 9: | Identify Property You Hold or Control | for Someon | ne Else | | | |
| | | | | | | | |
| 23. | Do | you hold or control any property that some | one else own: | s? Include any | property you bo | orrowed from, are storing for, or hold in | trust for |
| | son | neone. | | | | | |
| | | No | | | | | |
| | $ lap{}$ | No | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | | Where is | the property? | | Describe the contents | Value |
| | | | | | | | |
| | | Owner's Name | NumberSt | reet | | | |
| | | | | | | | - |
| | | Number Street | - | | | | |
| | | | | | | | |
| | | | City | State | Zip Code | | |
| | | | , | | · | | |
| | | City State Zip Code | | | | | |
| | | | | | | | |
| Part | 10: | Give Details About Environmental In | formation | | | | |
| _ | | (D. 140 II. (II.) III. | | | | | |
| For | the p | ourpose of Part 10, the following definitions app | oly: | | | | |
| | ■ E | Environmental law means any federal, state, or lo | ocal statute or | regulation cond | cerning pollution. | contamination, releases of | |
| | | azardous or toxic substances, wastes, or mater | | | | | |
| | in | ncluding statutes or regulations controlling the c | leanup of the | se substances, | wastes, or materia | al. | |
| | ■ S | ite means any location, facility, or property as d | ofinad under a | ny onvironmon | tal law whother w | you now own, operate, or utilize it | |
| | | r used to own, operate, or utilize it, including di | | illy environmen | itai iaw, wiietiiei y | ou now own, operate, or utilize it | |
| | | | | | | | |
| | | Hazardous material means anything an environm | | | lous waste, hazar | dous substance, | |
| | to | oxic substance, hazardous material, pollutant, c | ontaminant, o | r sımılar term. | | | |
| Rep | ort al | Il notices, releases, and proceedings that you kr | now about, reg | gardless of whe | en they occurred. | | |
| | | | | | - | | |
| 24 | ل ام | any governmental unit notified you that yo | u may ba liak | do or notontic | ully liable under | or in violation of an anvironmental laws | , |
| 24. | паз | s any governmental unit notified you that yo | u may be nat | ne or potentia | illy hable under | or in violation of all environmental laws | |
| | V | No | | | | | |
| | H | Yes. Fill in the details. | | | | | |
| | ш | res. I iii ii i die details. | | | | | |
| | | | Governme | ental unit | | Environmental law, if you know it | Date of |
| | | | | | | | notice |
| | | | | | | | |
| | | Name of site | Governme | ntal unit | | | |
| | | Number Street | NumberSt | root | | | |
| | | Number Street | NumberSti | eet | | | |
| | | | <u>C:+ :</u> | Ot-2 | Zim Onella | | |
| | | | City | State | Zip Code | | |
| | | City State Zip Code | | | | | |
| | | p | | | | | I |
| 25. | Hav | ve you notified any governmental unit of any | release of h | azardous mate | erial? | | |
| | | , unit of unit | | | | | |
| | V | No | | | | | |
| | Ħ | Yes. Fill in the details. | | | | | |
| | ш | | • | | | | |
| | | | Governme | ental unit | | Environmental law, if you know it | Date of |
| | | | | | | | notice |
| | | Name of site | Governme | ntal unit | | | |
| | | Name Of Sile | Governine | indi uiiil | | | |
| | | Number Street | NumberSti | reet | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | City | State | Zip Code | | |
| | | | Oity | Glate | Zip Oode | | |
| | | City State Zip Code | | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 46 of 71

| Deb | tor 1 | Cheryl | | - | Fox | Case num | nber (ifknown) | |
|------|----------|----------------------|-----------------|-------------------|-----------------------------|------------------------|---|--------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | Hav | e you been a part | y in any judici | al or administr | rative proceeding under | any environmental la | w? Include settlements and order | rs. |
| | ✓ | No | | | | | | |
| | | Yes. Fill in the det | ails. | | | | | |
| | | | | | Court or agency | Na | ture of the case | Status of the case |
| | | Case title | | | Court Name | | | Pending |
| | | | | | | | | On appeal |
| | | Case number | | | NumberStreet | | | Concluded |
| | | | | | City State | Zip Code | | |
| Part | 11: | Give Details Ab | oout Your B | usiness or Co | onnections to Any Bu | ısiness | | |
| 27. | Witl | hin 4 years before | you filed for l | oankruptcy, did | l you own a business or | have any of the follow | ving connections to any business? | ? |
| | | - | | | | - | | |
| | | | | - | ade, profession, or othe | | ne or part-time | |
| | | | | lity company (L | LC) or limited liability pa | artnersnip (LLP) | | |
| | | A partner in a | - | | | | | |
| | | | | - | e of a corporation | | | |
| | | An owner of a | at least 5% of | the voting or e | equity securities of a cor | poration | | |
| | V | No. None of the a | above applies | . Go to Part 12. | | | | |
| | | Yes. Check all that | at apply abov | e and fill in the | details below for each I | ousiness. | | |
| | | | | | Describe the nat | ure of the business | Employer Identification nu include Social Security nu | |
| | | Business Name | | | _ | | EIN: | |
| | | Dusiness Name | | | | | | |
| | | Number Street | | | Nome of account | out ou bookkooneu | Dates business existed | |
| | | City | State | Zip Code | — Name of account | ant or bookkeeper | F T- | |
| | | Oity | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | Describe the nat | ure of the business | Employer Identification nu | ımbor Do not |
| | | | | | Describe the nati | are of the business | include Social Security nu | |
| | | Business Name | | | _ | | EIN: | |
| | | Sacinoso Name | | | | | | |
| | | Number Street | | | Name of account | ant or bookkeeper | Dates business existed | |
| | | City | State | Zip Code | — Name of account | ant or bookkeeper | From To | |
| | | Oity | Otate | Zip Oode | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the nat | ure of the business | Employer Identification nu include Social Security nu | |
| | | Business Name | | | _ | | EIN: | |
| | | Number Oliver | | | _ | | Datas husinass sviets d | |
| | | Number Street | | | Name of account | ant or bookkeeper | Dates business existed | |
| | | City | State | Zip Code | _ | | From To | |
| | | | | | | | | |
| | | | | | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 47 of 71

| Deb | | Cheryl | L | Fox | Case number (if known) |
|------|--------|---------------------------------------|-------------------------|--------------------------------|--|
| | | First Name | Middle Name | Last Name | |
| 28. | | ditors, or other parties. | r bankruptcy, did you ç | jive a financial statement to | anyone about your business? Include all financial institutions, |
| | | No Yes. Fill in the details below. | | | |
| | | | | Date issued | |
| | | Name | | MM/DD/YYYY | |
| | | Hamo | | | |
| | | Number Street | | | |
| | | City State | Zip Code | | |
| Pari | | Sign Below | • | | |
| 1 | true a | and correct. I understand that | making a false staten | nent, concealing property, o | and I declare under penalty of perjury that the answers are r obtaining money or property by fraud in connection with ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /s/ Cheryl Fox | | × | |
| | | Signature of Debtor | r 1 | | Signature of Debtor 2 |
| | | Date 4/13/2018 | | | Date |
| | ✓ N | vlo Ves | | | Filing for Bankruptcy (Official Form 107)? |
| l | Did y | ou pay or agree to pay someo | ne who is not an attor | ney to help you fill out bankr | ruptcy forms? |
| | _ | No | | | |
| | □ ′ | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 48 of 71

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern District | of Illinois | | | | | |
|------|---|------------------------------------|------------------------------------|-------------------------------|--|--|--|--|
| n re | Cheryl L Fox | | Case No. | | | | | |
| | Debtor | | | (If known) | | | | |
| | | | Chapter | Chapter 13 | | | | |
| | DISCLOSURE OF | COMPENSATION | OF ATTORNEY F | OR DEBTOR | | | | |
| 1 | Pursuant to 11 U.S.C. § 329(a) and f compensation paid to me within one rendered or to be rendered on behalf | year before the filing of the pet | ition in bankruptcy, or agreed to | o be paid to me, for services | | | | |
| | For legal services, I have agreed to a | cept | | \$4,000.00 | | | | |
| | Prior to the filing of this statement I | nave received | | \$350.00 | | | | |
| | Balance Due | | | \$3,650.00 | | | | |
| 2 | . The source of the compensation paid | d to me was: | | | | | | |
| | ✓ Debtor | Other (specify) | | | | | | |
| 3 | . The source of the compensation paid | d to me is: | | | | | | |
| | ✓ Debtor | Other (specify) | | | | | | |
| 4 | I have not agreed to share the ab members and associates of my I | | vith any other person unless the | ey are | | | | |
| | I have agreed to share the above members or associates of my law the people sharing in the compe | v firm. A copy of the agreement | | | | | | |
| 5 | . In return for the above-disclosed fee | , I have agreed to render legal se | ervice for all aspects of the bank | kruptcy case, including: | | | | |
| | Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; | | | | | | | |
| | b. Preparation and filing of any | petition, schedules, statements | of affairs and plan which may b | oe required; | | | | |
| | c. Representation of the debtor | at the meeting of creditors and | confirmation hearing, and any | adjourned hearings thereof; | | | | |
| | d. Representation of the debtor | in adversary proceedings and c | other contested bankruptcy mat | ters; | | | | |
| 6 | . By agreement with the debtor(s), the | above-disclosed fee does not in | nclude the following services: | | | | | |
| | | | | | | | | |
| | | CERTIFICAT | ION | | | | | |
| | certify that the foregoing is a completor(s) in this bankruptcy proceedings. | e statement of any agreement of | or arrangement for payment to r | ne for representation of the | | | | |
| | 4/13/2018 | | /s/ Elise Harmening | | | | | |
| | Date | | Signature of Attorney | | | | | |
| | | | Semrad Law Firm | | | | | |
| | | | Name of law firm | | | | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 49 of 71

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 50 of 71

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 51 of 71

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$362.00
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$52.00 for expenses, leaving a balance due of \$4,012.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 4/13/2018 | |
|----------|-----------|------------------------|
| Signed: | | |
| /s/ Che | ryl Fox | |
| | | /s/ Elise Harmening |
| Debtor(s | s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1.717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 58 of 71

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Fox, Cheryl L | Case No | |
|-----------------|---------------|--|-------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter13 |
| | VERIFIC | CATION OF CREDITOR MAT | RIX |
| Th knowledge | • | y that the attached list of creditors is tru | ue and correct to the best of their |
| Date: | 4/13/2018 | /s/ Fox, Cheryl L | |
| | | Fox, Cheryl L Signature of Debi | tor |

SOC SEC ADMIN OFFICE O 155-10 JAMAICA AVE JAMAICA, NY, 11432

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA, 30301

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 62 of 71

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

 However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$362.00
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$52.00 for expenses, leaving a balance due of \$4,012.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 4/12/2018 | _ |
|---------|-----------|------------------------|
| Signed: | | |
| /s/ Che | ryl Fox | /s/ Elise Harmening |
| Debtor(| s) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

Dear Client,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required by pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Sections 3.1, 3.2, or 3.3 (for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may lower that amount that the Firm will receive each month and increase the monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover

THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28th Floor Chicago, IL 60603 (312) 913-0625

additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- a. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- b. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

One of its Attorneys

Accepted:

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 67 of 71

| Debtor 1 Cheryl | L Fox | | nber (ffknown) |
|---|---|--|---|
| Part 6: Answer These Que | Middle Name Last estions for Reporting Purposes | Name | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily co "incurred by an individual pr No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily be | rimarily for a personal, family, usiness debts? Business deb estment or through the operat | ots are debts that you incurred to obtain ation of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No. I am not filing under Chapter 7. Yes. I am filing under Chapter 7. expenses are paid that fun No. Yes. | | exempt property is excluded and administrative to unsecured creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000 |
| 19. How much do you estimate your assets to be worth? | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 m \$100,000,001-\$500 million | llion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 milli \$10,000,001-\$50 mil \$50,000,001-\$100 m \$100,000,001-\$500 i | llion |
| Part 7: Sign Below | | | |
| For you | correct. If I have chosen to file under Chap of title 11, United States Code. It under Chapter 7. If no attorney represents me and lout this document, I have obtained I request relief in accordance with I understand making a false state. | oter 7, I am aware that I may punderstand the relief available did not pay or agree to pay so did and read the notice required the chapter of title 11, United ment, concealing property, or se can result in fines up to \$25 | rjury that the information provided is true and proceed, if eligible, under Chapter 7, 11,12, or 1st eligible and I choose to proceed comeone who is not an attorney to help me fill d by 11 U.S.C. § 342(b). d States Code, specified in this petition. obtaining money or property by fraud in 50,000, or imprisonment for up to 20 years, or |
| | Signature of Debtor 1 | | Signature of Debtor 2 |
| | Executed on 4/12/2018 MM / DD / | | Executed on |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 68 of 71

| Fill in this inform | nation to identify your c | ase: | TO STANDARD | | |
|---------------------------------|---|-----------------------------|--|--|-----------------------------------|
| Debtor 1 | Cheryl | L | Fox | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| (opeace; ii iiiiig) | rirst Name | Middle Name | | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | | | | | |
| Official | Form 106De | 0 | | | Check if this is a amended filing |
| Official | rollii 100De | : U | | | g |
| Declarati | ion About an | Individual Debt | or's Schedule | es | 12/1 |
| If two married p | people are filing togeth | er, both are equally respo | nsible for supplying corr | rect information. | |
| money or prope | | | | Making a false statement, concealing to \$250,000, or imprisonment for up to | |
| Part 1: Sign | Below | | | | |
| Did you pa | ay or agree to pay some | eone who is NOT an attorn | ey to help you fill out ba | ankruptcy forms? | |
| ✓ No | | | | | |
| Yes. N | Name of person | | Attach Bankrupto Signature (Officia | cy Petition Preparer's Notice, Declaration, ar al Form 119). | nd |
| | | | | | |
| | | | | | |
| | nalty of perjury, I declar are true and correct. | re that I have read the sum | mary and schedules file | ed with this declaration and | |

Signature of Debtor 2

MM/DD/YYYY

Date

/s/ Cheryl Fox
Signature of Debtor 1

Date 4/12/2018 MM/DD/YYYY

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 69 of 71

| Deb | otor 1 Cheryl | L | Fox | Case number (if known) | | |
|------|---|--------------------|------------------------------|---|--|--|
| | First Name | Middle Name | Last Name | | | |
| 28. | Within 2 years before you filed for creditors, or other parties. | r bankruptcy, did | you give a financial state | ement to anyone about your business? Include all financial institutions, | | |
| | No Yes. Fill in the details below. | | | | | |
| | _ | | Date issued | | | |
| | · | | _ | <u> </u> | | |
| | Name | | MM/DD/YYYY | | | |
| | Number Street | | - - | | | |
| | | | | | | |
| | City State | Zip Code | | | | |
| Pari | t 12: Sign Below | | | | | |
| 1 | I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| | Signature of Debto | r1/ | | Signature of Debtor 2 | | |
| | Date 4/12/2018 | | | Date | | |
| ı | Did you attach additional pages to | Your Statement | of Financial Affairs for Inc | dividuals Filing for Bankruptcy (Official Form 107)? | | |
| | ✓ No Yes | | | • | | |
| ı | Did you pay or agree to pay some | ne who is not an a | attorney to help you fill o | ut bankruptcy forms? | | |
| ı | ☑ No | | | | | |
| İ | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 70 of 71

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Fox, Cheryl L | Case No. |
|-----------------|---------------|---|
| 2 | Debtor(s) | 0030110. |
| | | Chapter. Chapter13 |
| | VERIFICA | ATION OF CREDITOR MATRIX |
| Th knowledge | | hat the attached list of creditors is true and correct to the best of their |
| | | |
| Date: | 4/12/2018 | /s/ Fox, Cheryl L Fox, Cheryl L Signature of Debtor |

Case 18-10877 Doc 1 Filed 04/13/18 Entered 04/13/18 15:43:21 Desc Main Document Page 71 of 71

| Debt | or 1 Cheryl First Name | L Middle Name | Fox Last Name | Case number (f known) | |
|------|------------------------------------|---|----------------------------------|---|-------------|
| 16 | | amily income that applies to | | Je. | |
| 10. | 16a. Fill in the state in wh | | Illinois | | |
| | 16b. Fill in the number of | f people in your household. | 3 | _ | |
| | 16c. Fill in the median fa | mily income for your state and s | ize of | _ | \$80,233.00 |
| | household using the link specif | ied in the separate instructions f | | nd a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office. | |
| 17. | How do the lines comp | | | | |
| | | | | is form, check box 1, <i>Disposable income is not determined tion of Disposable Income</i> (Official Form 122C-2). | |
| | U.S.C. § 1325(| | Calculation of Dispo | neck box 2, Disposable income is determined under 11 osable Income (Official Form 122C-2). On line 39 of that | |
| Part | Calculate Your C | ommitment Period Under | 11 U.S.C. §1325(| b)(4) | |
| 18. | Copy your total average | monthly income from line 11 | I. | | \$1,380.00 |
| 19. | | | | is not filing with you, and you contend that calculating the fyour spouse's income, copy the amount from line 13. | |
| | 19a. If the marital adjustr | nent does not apply, fill in 0 on | line 19a. | | -\$0.00 |
| | 19b. Subtract line 19a | from line 18. | | | \$1,380.00 |
| 20. | Calculate your current | monthly income for the year. | Follow these steps: | | |
| | 20a. Copy line 19b. | | ******************************** | | \$1,380.00 |
| | Multiply by 12 (the | number of months in a year). | | | x 12 |
| | 20b. The result is your cu | urrent monthly income for the ye | ear for this part of the | form. | \$16,560.00 |
| | 20c. Copy the median fa | mily income for your state and s | size of household fron | n line 16c. | \$80,233.00 |
| 21. | How do the lines comp | are? | | | |
| | | line 20c. Unless otherwise orde is 3 years. Go to Part 4. | ered by the court, on t | he top of page 1 of this form, check box 3, The | |
| | | n or equal to line 20c. Unless of period is 5 years. Go to Part 4. | therwise ordered by th | ne court, on the top of page 1 of this form, check box | |
| Part | 4: Sign Below | | | | |
| | | | | | |
| | By signing nere, I de | clare under penalty of perjury that | at the information on | this statement and in any attachments is true and correct. | |
| | /s/ Cheryl For | | ; | × | |
| | Signature of Deb | otor 1 | | Signature of Debtor 2 | |
| | Date 4/12/2018 MM/DD/Y | | | Date MM/DD/YYYY | |
| | | do NOT fill out or file Form 1220 fill out Form 122C-2 and file it w | | 39 of that form, copy your current monthly income from line | e 14 |